

STATEMENT OF ORGANIZATION

OFFICE USE ONLY

1. Name and Address of Committee

Friends of the Council on Aging
53532 Hwy. 191
Florien, LA 71429

2. Date of this Statement

May 21, 2003

3. Estimated Membership

3

4. Amended Statement?

Yes ☐ No ☒

PAC
S/O
5/27

0303595

5. All Committee Officers and Directors (including Chairperson, Treasurer, if any, and any other committee officers and directors)

a. Name

b. Position

c. Address

Lewis McBryde

Chairperson

716 Petty Road Many, LA 71449

Tammy Foster

Treasurer

53532 Hwy. 191 Florien, LA 71429

6. Affiliated Organizations

(Any organization, other than a political committee, which directly or indirectly established, administers, or financially supports this committee.)

a. Name

b. Address

c. Relationship to Committee

n/a

7. All Depositories for Committee Funds (committee funds must be deposited in one or more banks or savings and loan institutions or money market mutual funds.)

a. Name

b. Address

Peoples State Bank P.O. Box 1200 Many, LA 71449 318-256-2071

8. IF THIS COMMITTEE SUPPORTS A SINGLE CANDIDATE: a. Check one: ☐ Principal Campaign Committee ☐ Subsidiary Committee

b. Name of Candidate

Proposition of 1/4 of 1¢ sales tax election
to be held July 19, 2003.

c. Office Sought by the Candidate

9. a. Name of Person Preparing Report

Tammy Foster

b. Daytime Telephone

(318)256-6223 work

(318)565-4380

home

10. WE HEREBY CERTIFY that the information contained in this STATEMENT OF ORGANIZATION is true and correct to the best of our knowledge, information and belief.

This 21 day of May, 2003.

Levin A. McPart
Signature of Committee Chairperson

318-256-2121
Daytime Telephone Number

[Signature]
Signature of Committee Treasurer, if any

318-256-6223
Daytime Telephone Number

Form 200, Rev. 5/98

COMMITTEES WITH OVER 250 MEMBERS

The following certification is OPTIONAL and should be completed ONLY if it is applicable to your committee. Completion of this certification doubles the normal limitations on the amounts of contributions to candidates that are otherwise applicable to political committees.

11. WE HEREBY CERTIFY that the membership of this political committee exceeded two hundred fifty (250) members as of December 31 of the calendar year immediately preceding the date of this STATEMENT OF ORGANIZATION. We further certify that at least two hundred fifty (250) of the members of this political committee contributed at least fifty dollars (\$50.00) to this committee during the calendar year immediately preceding the date of this STATEMENT OF ORGANIZATION.

This _____ day of _____.

Signature of Committee Chairperson

Daytime Telephone Number

Signature of Committee Treasurer, if any

Daytime Telephone Number

INSTRUCTIONS

READ ALL INSTRUCTIONS CAREFULLY. PRINT OR TYPE ALL INFORMATION LEGIBLY IN BLACK INK.

- A \$100 filing fee must accompany the Statement of Organization. The fee should be paid with a committee check payable to "Campaign Finance."
- This form must be filed every year between January 1 and January 31, subject to the following exceptions:
 - If a committee organizes after January 31, then this form must be filed within 10 days of the date of organization.
 - If the committee organizes within 10 days prior to an election, then this form must be filed within 3 days of the date of organization.
 - If the committee does not anticipate that it will have over \$500 in total financial activity for a particular calendar year, it is not required to file this form for that year. If it determines later in that year that it will exceed \$500 in total financial activity, then this form must then be filed within 10 days.